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ABSTRACT

Designed for high school students interested in careers in special education and related services, this guide outlines the role of the occupational therapist. It addresses the nature of the work, the education required, personal qualities that occupational therapists should have, job outlook and advancement, and how to prepare for a career as an occupational therapist. Occupational therapists are described as using purposeful activities with people who need to develop or regain skills to learn, play, be employed, and care for themselves. School-based occupational therapists serve children who are developmentally delayed, children with emotional, mental and physical disabilities, children with learning disabilities, and children who are at-risk for developing problems. The minimum educational requirements for an occupational therapist is a bachelor's degree, but most states require occupational therapists to obtain a license to practice. This usually means attending an accredited program that includes a supervised clinical internship for at least 6 months and taking a certification examination. Personal qualities that school occupational therapists should have include patience, maturity, tactfulness, and creativity. A profile of an occupational therapist is provided to illustrate the challenges and benefits of the job. (CR)

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Occupational Therapist

Four-year-old Jamie wants to draw a snowman in his preschool class, but because he has weak muscles in his upper arms due to a physical disability, he cannot hold a crayon to draw a circle. Mary, an infant who was born four months prematurely, is unable to suck from a bottle and has difficulty being handled and bathed by her parents. Luis, an active first grader who has Down syndrome, is the shortest boy in his class. In fact, he is three inches shorter than most of the children. His teacher has noticed that Luis's desk and chair don't fit him properly and he tires easily while working quietly with a book or assignment. Jody, a middle school student, is recovering from substance abuse. She is making good progress in her special education classes, but she has visual perception problems and memory loss.

Occupational therapists can improve the school performance of each student described above. These specialists use purposeful activities with people who need to develop or regain skills to learn, to play, to be employed, and to care for themselves. School-based occupational therapists serve children who are developmentally delayed; emotionally, mentally and physically disabled; learning disabled; or those who are considered at risk for developing problems. Like other special education professionals in the school system, occupational therapists usually collaborate with their colleagues when working with children. They are trained to evaluate performance, identify deficit and strength areas, develop goals for each student, and evaluate progress.

Nature of Work

"Children spend a lot of time playing. So if you can be playful and inventive when working with them, you'll be more successful," remarked one occupational therapist who has worked with elementary-age children for more than 20 years. Her inventiveness was directly applied to a plan that helped one 8-year-old boy improve his coordination in driving an electric wheelchair. Before the therapy began, Mark (who is unable to walk) had limited use of his arms, could not hold his head erect, and regularly collided into walls and doorways with his wheelchair. A teacher's aide often needed to help him get to class. The occupational therapist worked with the youngster and his parents on several goals. By learning how to stabilize his head, Mark gained broader vision while driving and reduced the number of times he drove into walls. When he practiced the arm muscle and finger exercises she demonstrated, he was able to better control the wheelchair joystick. The school's physical therapist then designed an obstacle track. Mark maneuvered his wheelchair around cones and other obstacles, and enjoyed the freedom of driving without classmates observing him. The speech-language pathologist helped Mark write his own "Rules of the Road" on a school computer, emphasizing sentence structure and punctuation, which were determined to be weak skills.

Occupational Therapists help children to learn dozens of useful skills that can help them be as independent as possible. Students learn to manipulate objects... copy shapes, letters, numbers and designs; correctly space words when writing;... and properly use eating utensils.

At the end of the 2-month project, under the guidance of the occupational therapist, Mark designed and wrote his own driver's license on the computer. It was presented to him in a special ceremony by the teachers who had worked most closely with him. The boy's mother commented that his wheelchair driving ability had improved so much that his confidence as a student had soared, and that he had done some small errands at home in the wheelchair for the first time. As a final benefit, Mark's classmates responded more favorably to him because he could efficiently get to classes on time and no longer needed an attendant to push him or dislodge him from a collision.

Although federal law requires that occupational therapy be available to students up to age 21, the majority of occupational therapists employed in schools work with elementary-age children. More intensive occupational therapy services are needed during the times a child is acquiring new skills such as during the first few years of life or transitioning to new programs, new schools, or community job sites. These are critical periods of learning and generalizing skills.

Occupational therapists help children to learn dozens of useful skills that can help them be as independent as possible. Students learn to manipulate objects such as puzzles, books, scissors, pencils; copy shapes, letters, numbers, and designs; correctly space words when writing; open, close, and organize a locker and desk; and properly use eating utensils. Therapists work with children in day care settings, homes, regular education classrooms, and community job sites.

Each student's goals are recorded in a Individualized Education Program (or Individualized Family Service Plan for 0–2 year olds) that is prepared by the education team, which may include the occupational therapist, parents, and others who are providing services to the child. Although documenting each child's progress can be time consuming, record keeping and report writing are a valuable source to determine if the goals are being met.

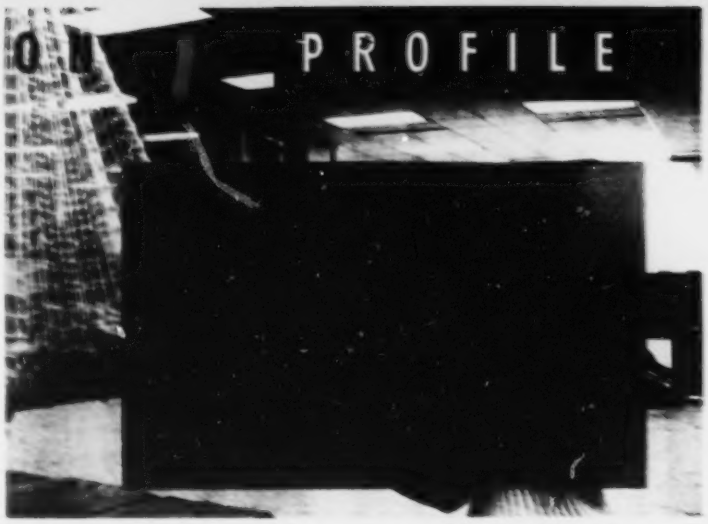
Education Required

A bachelor's degree is the minimum requirement to become an occupational therapist. Approximately 97 institutions offer programs/studies that are accredited by the Accreditation Committee for Occupational Therapy Education, and all programs include a supervised clinical internship for at least 6 months. Most states and the District of Columbia require occupational therapists to obtain a license to practice. Graduates of accredited occupational therapy programs can take the certification examination administered by the National Board for the Certification of Occupational Therapy. Candidates who pass the exam become registered occupational therapists and may use the letters OTR after their name. College students enrolled in occupational therapy classes typically study anatomy, physiology, kinesiology, neurology, psychology, human growth and development, occupational therapy theory and techniques, and the impact of disability on daily life and work skills.

Personal Qualities

Occupational therapists who work in schools are patient, mature, tactful, and creative. They genuinely enjoy helping children and youth, work well with other faculty members and health professionals, and maintain accurate records of each student's progress. Good physical health and stamina are also desirable, since occupational therapists often stand for long periods, move equipment, travel between schools, and work at eye-level with the children.

PRACTITIONER PROFILE



Lilyan Jones Williams

Occupational Therapist

Arlington County Public Schools

Arlington, Virginia

Lilyan Jones Williams is an occupational therapist who works with preschool and elementary age children in Arlington County Public Schools in Arlington, Virginia. A native Californian, Lilyan first learned about occupational therapy as a teenager when she volunteered to work in a hospital. "I was impressed with what I saw. Occupational therapists were using various devices, games, and activities to help patients return to a productive life," she recalled. Lilyan earned a bachelor of science degree from Loma Linda University in 1987, and a master's degree in special education from Howard University in Washington, D.C.

For the past 6 years, Lilyan has been employed full-time for the Arlington school system. She rotates among three schools and has a caseload of 60 children (15 are preschoolers). Although Lilyan is the only occupational therapist at two schools, she works daily with speech-language pathologists or physical therapists in planning and teaching. Some of Lilyan's classes are comprised entirely of special needs children. Other classes are integrated with both typical and special needs children. "In one class of 25, I have just one student who needs help. Instead of pulling out that particular child for occupational therapy in a separate room, I work with the teacher and we rotate small groups of children through my 'center.' With this method, the child who needs special help remains anonymous because the whole group has fun with the skill activities I plan," she explained. At the request of teachers, administrators, or parents, Lilyan also screens and evaluates children ages 2 to 12 for visual-motor, visual-perception, gross motor, fine motor, self-help, and other skills that can affect school performance.

Daily Schedule: The preschool children arrive at 8:00 a.m. for a 5-hour school day. Lilyan works first with children who are designated for individual therapy. One youngster might practice buttoning a sweater; another will draw broad chalk lines on the board, imitating the teacher's vertical and horizontal strokes. When the entire class assembles, motor group activities are presented, which are jointly planned by the occupational therapist, speech pathologist, and physical therapist on staff. In April, for example, this team designed a farm animal unit. For the speech portion, the children sang "Old MacDonald," identified pictures of animals, and repeated animal sounds. The physical therapist set up an obstacle course where the children crawled, galloped, rolled, and pushed a bale of hay. Lilyan's contribution for occupational therapy skills was supervising the class as they "milked" a cardboard cow. (A rubber glove, with tiny holes punched in the fingertips, was filled with milk to encourage children to develop grasping and squeezing motions with their hands.) After the children leave for the day, Lilyan meets with the teachers and therapists to discuss the progress of individual children and to make recommendations.

Challenges: "My biggest challenge is working in an inclusive setting. In my school system, many children who need occupational therapy are provided services in their regular classrooms. While there are many advantages to my teaching in a standard kindergarten class, for example, it does require much more time and collaboration from all teachers involved. In a class of 20 youngsters, I might have two who need to work on eye skills, two who need to work on fine motor skills, and three who need to work on large motor skills. It's challenging to provide curriculum that meets all these needs during a 1-hour period."

Satisfaction: "I have worked with children who were unable to eat, put on a coat, hold a crayon, do a one-piece puzzle, or tolerate touching certain items such as glue. To see how much these children benefit from occupational therapy is heartwarming and satisfying. I feel pride when I can make even a slight difference to improve their lives."

Job Outlook and Advancement

Between 1992 and 2005, occupational therapy will be in the top 20 fastest growing occupations in the United States according to the Bureau of Labor Statistics. In 1992, about 40,000 occupational therapists were employed nationwide. By 2005, present enrollment in educational programs will not meet projected needs. Currently, 17% of occupational therapists are employed in hospitals, 19% work in schools, 13% work in nursing homes, and the remainder have jobs in day care facilities, home health, community agencies, and private practice. Employment analysts predict that employment opportunities for occupational therapists to work in schools will grow rapidly in the 21st century.

How to Prepare for a Career

Students considering this career should take high school courses in biology, chemistry, physics, health, art, and the social sciences. To gain exposure to this profession, contact the local school district or special education agency and ask about spending a day following the occupational therapist and/or volunteering to assist with the special education classroom activities. Working in summer recreation programs, camps, or volunteering in children's units in hospitals are excellent ways to gain experience working with children.

Resource Information

American Occupational Therapy Association, Inc.
4720 Montgomery Lane
P.O. Box 31220
Bethesda, Maryland 20824-1220
(301) 652-2682

National Clearinghouse for Professions in Special Education
1920 Association Drive
Reston, Virginia 20191-1589
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URL: http://www.cec.sped.org/pc.htm

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